Chapter Three ◆ Report on Performance Measures of the FY 1999-01 Homeless Families Plan

**Report on the Performance Measures of the
FY 1999-01 Homeless Families Plan**

The overall purpose of performance measures in the *Homeless Families Plan* is to keep our focus on the ultimate outcome: helping families with children avoid homelessness or, if they are homeless, quickly regain and maintain housing stability. While information on program outcomes is limited due to the relatively short period of time programs have been in operation, the data that has been collected thusfar is presented in the following pages.

The ultimate outcome is to help families secure stable housing.

Goal #1	Shelter Homeless Families.	Progress Report
Action Step #5 in 1999-01 Plan	*Increase availability of ESAP resources.*	The original ESAP ($5 million) received an additional $2.5 million for the biennium. This enabled ESAP providers to expand services to homeless families with children. The following is output information gathered for the first half of the biennium (July 1999 to June 2000). No additional resources were made available to improve the data system, so the counts of numbers served and turned away continue to be duplicated.
Output Measures	• Number of shelter bednights per year provided in ESAP shelters. • Number of sheltered persons in families per year in ESAP shelters (some duplication across shelters). • Number of sheltered families per year in ESAP shelters (some duplication across shelters). • Number of sheltered children in families per year in ESAP shelters. (some duplication across shelters). • Families' average length of stay in one shelter. • Number of families who do not get shelter (duplicated turnaways).	• The original ESAP funding provided 210,382 shelter and 89,495 prevention bednights for homeless families. • The new ESAP funding dedicated to families with children served 9,514 individuals in 3,073 households of which 5,697 were children. 87,198 shelter and 53,905 prevention bednights were provided. • On average, families stayed 13 days in one shelter. • Of the 68,790 households turned away from shelter and prevention assistance,

	• Average occupancy rates of ESAP shelters.* • Number of Individual Family Plans developed.*	36,134 were families with children. *These measures were not collected because OCD staff has reconsidered the benefits and practicality of collecting this information. They have been dropped from consideration at this time.
Intermediate Outcomes	• Increased percentage of families who move to transitional housing. • Increased percentage of families who move to permanent housing.	It has not been possible to track intermediate outcomes as proposed in the 1999-01 plan because a client tracking system has not been implemented. Until a new system is developed, no measurement of intermediate outcomes will occur.

Goal #2	**Return Homeless Families to Stable Housing**	**Progress Report**
Action Step # 6 in 1999-01 Plan **Action Step #7 in 1999-01 Plan**	*Use Increased state general funds for operating costs of transitional housing.* *Use increased capital funds to support construction and rehabilitation of emergency and transitional housing for homeless families with children.*	OCD received $5 million for transitional housing and developed the Transitional Housing Operating and Rent (THOR) program to provide rent assistance for homeless families and operating subsides for transitional housing facilities. Local agencies began implementing THOR in November 1999. There was also $5 million in capital funds available to construct or rehabilitate emergency shelter and transitional housing units. Another $1 million was set aside specifically for facilities serving survivors of domestic violence.

Output Measures	- Number of emergency and transitional units created. - Number of families per year enrolled in transitional housing. - Number of children in families in transitional housing. - Average length of stay for families in transitional housing. - Number of transitional housing days used per year. - Average occupancy rate for transitional housing.* - Number of transitional housing vouchers provided.*	For the period November 1999 to June 2000: 48 beds of emergency shelter and 46 units of transitional housing units were funded. 884 families enrolled in a transitional housing program and 373 have exited. 1,971 children in families were served in transitional housing. - Of the 373 families who exited the program, 190 were in transitional housing for 0-3 months, 138 for 4-6 months, and 45 for 7-12 months. *These measures were not collected. Since this was a new program, OCD opted for a very simple report that focused on key priority areas to minimize reporting burdens. OCD will work with providers to refine the reporting system once staff are more experienced with operating the new program.
Intermediate Outcomes	- At exit interview, percentage of transitional families who leave for permanent housing. - Percent of families who have an increase in income from intake to exit. - Percent of parents who demonstrate measurable increase in education level or skills from intake to exit.*	Of the 373 families who exited the program: 47% or 175 of the exiting families transitioned to unsubsidized housing. 33% or 123 of the exiting families transitioned to subsidized housing. - The status for 20% or 75 of the exiting families was unknown. 39% or 145 families increased their monthly income by more than $25.

Ultimate Outcome	• Percent of families who retain permanent housing for one year based on follow-up.	[Follow-up data gathered on 113 families six months after program participation.] • 45% or 51 families were still housed six months after program participation. • The status for 55% or 62 families six months after program participation was unknown.

Goal #3	Increase Number Of Homeless Families Accessing Needed DSHS Services.	Progress Report
Action Step #8 in 1999-01 Plan	*Implement training for DSHS employees to learn about homelessness factors and the DSHS and community resources available to help homeless families.*	
Output Measure	• Number and proportion of staff trained.	2,200 staff from Economic Services Administration's Community Services Offices attended training. 623 staff from Children's Administration's attended training.
Intermediate Outcome	• Before-after test of topic knowledge.** ***Note: After the FY 99-01 plan was published, this measure was changed to:*	A random sample of 769 DSHS staff who attended the training completed evaluations of the training. Of the sample of staff who completed evaluations:

	DSHS staff report satisfaction with training.	• 4.1 out of a possible 5 points was the average score on the following evaluation statement, *"I agree, that overall, this was a good and useful session."* (5 was "Yes-definitely true" and 4 was "Yes-mostly true"). 78% of all respondents said either "mostly true" or "definitely true" for this statement. • 3.8 out of a possible 5 points was the average score on the following evaluation statement, *"I agree that this session gave me a good opportunity to meet other DSHS staff and community services providers and discuss ways to collaborate in serving homeless and at-risk families."* 67% of all respondents said either "mostly true" or "definitely true" for this statement.
Action Step # 1 in the 1999-01 Plan	*DSHS will identify key staff to participate in local continuum of care planning.*	
Output Measure	• Percent of Continuum of Care planning groups that include DSHS representation.	Of the 32 Continuum of Care groups in the State of Washington, we are unable to determine the percentage that have regular participation from DSHS staff. However, the following number of staff from the DSHS Community Services Offices are regular participants in the local area planning groups:

		• Region 1 –Exact number unknown although there are 9 staff from Spokane • Region 2 – 3 staff • Region 3 – 5 staff • Region 4 – Exact number unknown (there are many homeless planning groups) • Region 5 – 8 staff • Region 6 – 7 staff The following number of staff from the DSHS Children's Administration are regular participants in the local area planning groups: • Region 1 – Exact number unknown • Region 2 – 3 staff; possibly more pending information from Benton-Franklin, Walla Walla, and Asotin Counties • Region 3 – Exact number unknown • Region 4 – No data • Region 5 – Exact number unknown • Region 6 – No data
Intermediate Outcome	• DSHS staff and other continuum of care participants report satisfaction with the planning process.	Anecdotal reports of satisfaction with the planning process by DSHS staff and others involved vary by group. In King County, there has been a high level of engagement and a high level of satisfaction. Similarly, in Spokane, Homeless Coalition members, DSHS staff from the East, Northeast, West office, and Child and Family

		Services exchange staff for training purposes to improve coordination of services. Spokane homeless service providers refer clients to the CSO for benefits and DSHS staff refer clients to the homeless providers. When appropriate, staff from all programs work together to address client needs. In other areas, the results are mixed.
Strategic Approach	*Shelter Staff Refer Homeless Families to DSHS Community Service Offices for eligibility assessment.*	OCD does not collect information on the number of referrals from shelter providers to CSOs. DSHS does not collect information on the source of referrals. However, anecdotal reports from shelter providers suggests that their increased communication with the CSOs has increased the number of referrals by a significant percentage.
Output Measure	• Number or percentage of referrals to Community Service Offices.	
Intermediate Outcome	• Referrals are made on a consistent and as needed basis.	

Goal #4	Assist Families With Great Likelihood of Homelessness to Maintain Stable Housing	Progress Report
Action Step # 3: in 1999-01 Plan	*Use DSHS Additional Requirements-Emergency Need (AREN) grants for eligible families as needed.*	
Strategic Approach	• Deliver cash grants to homeless and at-risk families quickly.	
Output Measure	• Number of families receiving AREN grants in order to avert homelessness.	Prior to the expansion of the AREN policy (August 1998- July 1999), the average number of families ("assistance units") that received AREN was 1,195 per month. After the policy expansion (August 1999- July 2000), the number increased by 143% to an average of 2,899 assistance units per month.
Ultimate Outcome	• Percentage of AREN families still housed in own domicile six months after receiving AREN grant.	Although the data are now being collected, because the measure requires a span of 6 months to have elapsed, DSHS has limited data on which to measure the effectiveness of the newly expanded program. Some initial AREN data spot checks indicate that most recipients of AREN are either housed six months later or are off the caseload.

Action Step # 3: in 1999-01 Plan	*Use DSHS Diversion Cash Assistance (DCA) grants to help eligible families prevent or resolve homelessness and avoid need for on-going TANF assistance.*	
Output Measure	• Number of families getting DCA grants for housing assistance.	93% of families getting DCA grants in 1999 used it for rent or mortgage (TANF Diversion Study Preliminary Findings 8/31/00). 212 families received DCA in July 1999 compared to 162 families who received DCA in July 2000. This decline in the number of families served is a result of the expansion of AREN.
Ultimate Outcome	• Percentage of DCA families not returning to the caseload within one year because of homelessness.	From the period of July 1999 – June 2000, 84% of DCA families did not return to the caseload within one year because of homelessness.
Action Step # 4 in 1999-01 Plan **Action Step # 5 in 1999-01 Plan**	*Use OCD Consolidated Emergency Assistance Program (CEAP) Funds to help non-TANF eligible families prevent or resolve homelessness.'* *Increase support to prevent or resolve homelessness in the ESAP in OCD using state-general funds.*	$2.5 million was transferred from DSHS to OCD to increase homelessness prevention services to non-TANF eligible families. OCD created a new program, the Emergency Housing Assistance Program (EHAP), to distribute EHAP funds. The following is for the period July 1, 1999 to June 30, 2000.

Output Measures	• Number of families getting EHAP grants from OCD contracted providers. • Number of families, adults, and children served by OCD contracted providers. • Number of evictions prevented. • Family housing plans developed/case management provided. • Average cost of assistance provided per household.	• 2,927 families served with prevention assistance. • 3,671 adults and 5,328 children served in EHAP. • 1,278 evictions prevented. • 169,114 of prevention bednights provided. • The average cost of assistance per household was $427.
Ultimate Outcome	• Percent of families who are assisted by community-based organizations and who are still housed after six months. The percentage figure is based on rigorous follow-up in a scientifically chosen sample of communities (dependent upon new resources available). • Anecdotal data on limited provider follow-up studies in some communities.	Additional resources are not available to conduct a rigorous follow-up study as proposed in the 1999-01 plan. Anecdotal information from providers will be available as the program matures and sufficient time has elapsed to see if families remain housed six months following assistance.

Legislative Budget Proviso	Report on Ways to Improve the State's Collection of Homeless Data	Progress Report
	The Legislature provided $50,000 to develop a plan for a system of collecting reliable and accurate data on people who are homeless. The Legislature specified that the plan contain at least two approaches based on a range of possible budgets.	In November 1999, OCD published a report on the "*Plan for a Data Collection System on People Who Are Homeless.*" The report discussed various methodologies for collecting reliable and accurate data. The approaches included: • Conducting a one-time count. • Establishing a client tracking system using a county-based reporting structure. • Establishing a client tracking system based on central data collection via the Internet. A proposal was developed to implement a client tracking system, however, it was not funded. Subsequently, OCD developed an electronic, web-based reporting system that is being used voluntarily by shelters receiving state funds. While it does not collect client level data, it is providing valuable insight into what it might take to migrate to a client tracking system statewide.

Chapter Four ◆ Homeless Families Plan 2001-03: Next Steps

The implementation of the FY 1999-01 plan has had a significant positive effect on the coordination of services at the local level, and has fostered increased collaborative planning. The FY 2001-03 plan will continue to promote this work. At this writing, the work of the FY 1999-01 plan is still in progress. Data are still being collected and analyzed. As we learn more, we will refine what we know is working, and make necessary adjustments to improve and extend our collaborative efforts.

Extending collaboration into the 2001-03 biennium.

Joint OCD and DSHS Efforts

A significant mark of progress has been the participation of both OCD and DSHS staff in local community homelessness continuum of care planning. Homelessness is a local problem. That is to say, each community has different strengths and needs in affordable housing stock, economic development, transportation, and social services, etc. To effectively combat homelessness, strategies, using resources committed by both state and local government, must be developed and implemented by and for local communities.

Every community has different assets and needs.

Ongoing Support of Local Continuum of Care Planning. OCD and DSHS are committed to ongoing state agency participation and support of local homelessness continuum of care planning. The state will focus on helping local communities marshal the necessary resources and strategies to address their unique circumstances, and facilitating regional solutions where appropriate. An area in which OCD and DSHS intends to play a key role is in increasing links between urban and rural continuum of care plans.

OCD and DSHS are in a unique position to help develop regional strategies.

Collaboration with Coalition in Training Activities. Other ongoing initiatives will focus on joint planning and implementation with the WSCH

in activities such as training workshops and seminars. OCD will continue to provide funding to the WSCH for education and training of shelter providers.

Initiatives Specific to DSHS

Homelessness Training Offered to Contracted Services Chemical Dependency and Mental Health Providers. Building on the homelessness training provided to DSHS staff in the Economic Services Administration and Children's Administration, DSHS will offer the training to others such as community services chemical dependency treatment providers and mental health services providers. The training sessions will use a similar format to the current training: small group sessions in local communities, with participants representing a range of interests and expertise. The DSHS Health and Rehabilitative Services Administration will take the lead in helping contractors coordinate this training.

Expanding homelessness training opportunities.

Use of Data from Research Survey to Improve State-Level Program Coordination. The research survey of homeless families will provide several lines of data about the importance of state-level inter-program coordination and case management. The interviews with families, and especially the matching of data from the interviews with DSHS administrative records, will yield data on the proportion of homeless families who, in addition to cash benefits, currently receive or need substance abuse treatment, mental health care, or/and domestic violence counseling, or DSHS-funded child welfare services. (Unmet need is not measured for child welfare services.)

TANF Time Limits. Families that continuously received TANF cash assistance from August 1997 will reach the last month of their five-year time limit beginning on August 2002. Up to 20 percent of the TANF caseload may be granted an extension. Currently, DSHS is in the process of developing this policy and identifying services available to help these families. DSHS is seeking a wide

Soliciting broad feedback to develop TANF time limits policy.

range of input to develop this policy from front line staff, to advocates and local area providers, including input from the WSCH.

Homelessness Prevention Services

An infusion of resources to prevent homelessness or to shorten the length of time a family is homeless has greatly increased access to services offered by DSHS and OCD. For the 2001-03 biennium, state agency staff will focus on ways programs can be better coordinated to maximize assistance to homeless families with children.

Focusing on coordination to significantly improve services.

Within OCD, the Emergency Housing Assistance Program (EHAP) and the Emergency Shelter Assistance Program (ESAP) will continue to prioritize homelessness prevention services to those families who are not eligible for TANF benefits. Services are accessed through community action agencies and community housing providers. OCD plans to collect community feedback from these providers to see if modifications or new program designs are needed to improve service delivery in EHAP and ESAP. Community forums and a survey will be conducted during the fall of 2000 to help guide program changes for the 2001-03 biennium.

For families who are on TANF, the AREN program administered by DSHS is the major housing resource. DSHS and OCD will continue to examine the coordination and referral process so DSHS case managers and local community providers know what additional supports exist in the community to compliment DSHS' services. For example, when a family does not meet the eligibility requirements for TANF, but has a need, the DSHS case managers know of the community resource to which to refer the families.

Capitalizing on opportunities to use resources of both agencies.

Additionally, if TANF families need longer-term rental assistance, the transitional housing program offered through OCD is a good resource. As a next step, DSHS and OCD will work to see how

our respective programs can work sequentially to maintain families on and off TANF in stable housing.

Lastly, OCD and DSHS will continue to participate in applications for additional federal funds, whenever feasible. The agencies will work together with the WSCH to effectively match and link resources to help more families prevent or resolve homelessness.

Housing Resources

Emergency Shelter. The policies guiding the use of OCD's Emergency Shelter Assistance Program (ESAP) funding used to support the operations of emergency shelters and programs for homeless families with children will be reviewed and updated based on feedback collected by via community focus groups and surveys, and other information collected by OCD staff. Any changes or program modifications will be ready to be implemented July 1, 2001.

Reviewing housing programs.

Transitional Housing. OCD will continue to work with the WSCH and other key stakeholder groups in examining ways to refine the rent assistance and operating subsidy programs for transitional housing that are currently underway. Benchmarks will be established to track program performance. As mentioned earlier, OCD will work with DSHS in exploring ways in which their prevention programs could be linked with transitional housing to help ensure that TANF families will continue to live in stable housing.

Emergency Shelter and Transitional Housing Capital Program. Input from shelter providers on the capital program for homeless families with children and for facilities serving survivors of domestic violence will also be sought in the program review planned for October-December 2000. Additionally, OCD will evaluate the types of housing created and the geographic distribution of housing projects to ensure that the most critical gaps are being filled across the state. Model

Increasing housing options.

projects will be identified and communities encouraged to plan for increasing the housing options available in the local area.

Data Collection and Reporting

OCD Data Collection. OCD will pilot the collection of client-level data on those served by the ESAP program in one or two counties, starting in January 2001. The pilot's goals include: protecting client confidentiality, unduplicating client counts, allowing for dynamic queries of client data, providing contractors with an electronic case management system, and developing a system that can be easily customized to serve unique local needs. Under strict controls client-level data could be matched with transitional housing system data and DSHS client data to research the interaction between and effectiveness of the systems.

OCD Data Collection Pilot Program

The pilot will also further clarify what resources are necessary to implement a client-based reporting system statewide. The "*Plan for a Data Collection System on People who are Homeless*," estimated that it would take between $385,000 and $1.4 million to develop and maintain a statewide client-based reporting system over the next five years, depending on the comprehensiveness of the system. Implementing a statewide client-based data system will not be possible using existing resources, without an inappropriate reduction in the level of emergency shelter services provided to Washington's communities.

Chapter Five ◆ Performance Measures for the FY 2001-03 Homeless Families Plan

OCD and DSHS are adopting the following performance measures for the *FY 2001-03 Homeless Families Plan.* The principles listed below will continue to guide the performance review in this plan. • Measurement systems should be unobtrusive and reasonable in cost; • Processes should be based on reliable quantitative and qualitative data; • Measures must be clearly tied to high-level goals and strategies; and • Measures must be collected consistently over time with the goal of helping agencies improve services to homeless families with children.	*Four Principles*

Shelter Homeless Families	**Goal # 1**
Maximize Use of ESAP resources.	**Action Step**
• Number of bednights provided per year. • Number of persons in families sheltered per year. • Number of children in families sheltered per year. • Average length of stay in shelter. • Number of families not sheltered.	**Output Measures**

Return Homeless Families To Stable Housing	Goal # 2
Use capital funds to develop and preserve emergency and transitional housing for homeless families with children (including facilities for survivors of domestic violence).	**Action Step #1**
• Number of emergency shelter beds developed or preserved. • Number of domestic violence shelter beds developed or preserved. • Number of transitional housing units developed or preserved. • Number of domestic violence transitional housing units developed or preserved.	**Output Measures**
Use state general funds to provide rental assistance to return homeless families to stable housing and to provide operating subsidies to transitional housing facilities that assist families to move from crisis to stable, permanent housing.	**Action Step #2**
• Number of persons in families provided transitional housing per year. • Number of children in families provided transitional housing per year.	**Output Measures**
• Number and percentage of families in transitional housing who leave to subsidized housing. • Number and percentage of families in transitional housing who leave to unsubsidized housing. • Number and percentage of families who have an increase in income from intake to exit. • Average length of stay in transitional housing.	**Intermediate Outcomes**

• Number and percentage of families who remain housed six months after exit from a transitional housing program.	**Ultimate Outcome**

Increase Number Of Homeless Families Accessing Needed DSHS Services.	**Goal #3**
Reduce the time it takes homeless families not yet receiving DSHS services to get on assistance and to receive their first check.	**Action Step # 1**
• Number of persons who apply for DSHS assistance (economic, food, medical) while they are homeless.	**Output Measure**
• Average number of days between initial application and eligibility determination. • Average number of days between eligibility determination and first check.	**Intermediate Outcomes**
Provide additional coordinated DSHS services for long-term homeless families.	**Action Step # 2**
• Number of families who experience prolonged homelessness.	**Output Measure**
• Number and type of DSHS services used by those families.	**Intermediate Outcome**

Assist Families With Great Likelihood of Homelessness to Maintain Stable Housing	Goal #4
Maximize use of state general funds to prevent or resolve homelessness in the ESAP and prioritize services to help non-TANF eligible families.	**Action Step #1**
• Number of families provided homelessness prevention assistance per year. • Number of individuals in families provided homelessness prevention assistance per year. • Number of children in families provided homelessness prevention assistance per year. • Number of evictions prevented per year. • Number of families provided case management services. • Number of family housing plans developed per year.	**Output Measures**
Within funding limits, use DSHS AREN and DCA grants to help families prevent or quickly resolve homelessness.	**Action Step # 2**
• Percent of homeless families who received AREN or DCA grants <u>AND</u> • Remained housed for the six months following the AREN and DCA grant period.	**Intermediate Outcomes**
Within funding limits, use either AREN or DCA grants in combination with other DSHS coordinated services to help families prevent or quickly resolve homelessness.	**Action Step # 3**
• Percent of homeless families who received AREN or DCA grants <u>AND</u>	**Intermediate Outcomes**

• Used services from DSHS Mental Health Division, Division of Alcohol and Substance Abuse, Division of Vocational Rehabilitation, or Aging and Adult Services Administration, <u>AND</u> • Remained housed for the six months following the AREN and DCA grant period.	

Generate new information on the way homeless or at-risk families use DSHS services, and the impacts of those services on their ability to regain or maintain stable housing.	**Goal #5**
Collect and analyze data and use those data to inform policy.	**ACTION STEP #1**
• Produce a report on homeless families, including information on the length of their homelessness and the DSHS services used.	**Output Measure**
Analyze data collected in the DSHS survey of families living in emergency shelters.	**ACTION STEP #2**
• Produce a report and fact sheets on homeless families on: • information on the length of their homelessness; • DSHS services used; • barriers to DSHS services; and • unmet service needs.	**Output Measure**

Improve DSHS Staff and Contractor Understanding of Homelessness and Participation in Homelessness Planning	**Goal #6**
Keep DSHS staff on continuum of care planning groups.	**ACTION STEP #1**
• Percent of active continuum of care planning groups with DSHS participation.	**Output Measure**
Train DSHS contracted chemical dependency and mental health treatment providers in factors leading to homelessness.	**ACTION STEP #2**
• Number of contracted providers who are trained.	**Output Measure**

Chapter Six ◆ Summary

As more is known, it becomes increasingly clear that homelessness is often an unintended consequence of other important social problems such as domestic violence, chemical dependency, and mental illness. Implementing effective preventive and early intervention services that help families address these problems will also have a positive impact on reducing the incidence of homelessness.

The mental health system, the child protective system, the welfare system, and other public systems of care are critical factors in reversing the growth of homelessness.

Much good work has been done, many homeless families have been helped, and new partnerships have flourished. We believe our coordination is having a positive impact on how services are being delivered and new resources are playing a vital role in helping families back to housing stability and independence.

Our plans for the 2001-03 biennium will continue to build on the momentum of our initial successes. We anticipate a whole host of data from the DSHS research study and the OCD community forums and survey to further help identify areas where we are doing well and areas where more intense work would be needed. This data will be used to make on-going adjustments to the Homeless Families Plan, which in turn will keep the planning process dynamic and an integral part of our program operations.

Research data and housing survey will aid future planning.

Over the course of the next two years, we will continue to forge and strengthen connections with many partners across the state. We will uphold the vision and commitment to help homeless families secure stable housing, enjoy a better quality of life, and move toward self-sufficiency. The ultimate beneficiaries, children in homeless families, will have the support and care they need to flourish and participate fully in our community.

Our commitment to help homeless families will continue unabated.